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Fill	in this information to identify your ca	ase:				1			
	otor 1 Janice Rhoo								
	otor 2 use, if filing)				_				
Uni	ted States Bankruptcy Court for the	SOUTHERN DISTRIC	CT OF OHIO						
	se number <u>14-51881</u> own)		-	Check if this is:  ✓ An amended filing  A supplement showing postpetition chapter 13 income as of the following date:					
$\bigcirc$ 1	fficial Form 106I							e lollowing date.	
	chedule I: Your Inc	nme				MM / DD/ `	YYYY		12/1
sup <sub>l</sub> spo	s complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filir r spouse is not filing wi	ng jointly, and your s ith you, do not inclu	spouse i de inforr	s liv natio	ing with you, inc on about your sp	ude info	ormation about more space is	your needed,
1.	Fill in your employment		Debtor 1	Debtor	D. h. h. o o o o o o o o o o o o o o o o				
	information.  If you have more than one job, attach a separate page with information about additional employers.		<b>✓</b> Employed		Debtor 2 or non-filing spouse  Employed				
		Employment status	☐ Not employed	= .	☐ Not employed				
		Occupation	Teacher						
	Include part-time, seasonal, or self-employed work.	Employer's name	Zane Trace Loc						
	Occupation may include student or homemaker, if it applies.	Employer's address	946 State Route 180 Chillicothe, OH 45601						
		How long employed the	here? <u>6 Years</u>	<b>;</b>					
Par	t 2: Give Details About Mor	thly Income							
spou	mate monthly income as of the dause unless you are separated.							-	
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	mplo	oyers for that pers	on on the	e lines below. If	you need
						For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly, or			2.	\$	5,597.84	\$	N/A	
3.	Estimate and list monthly overt	me pay.		3.	+\$	0.00	+\$_	N/A	
4.	Calculate gross Income. Add lin	e 2 + line 3.		4.	\$	5,597.84	\$_	N/A	

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Deb	tor 1	Janice Rhodes		Case	e number (if know	n) .				
					r Debtor 1		non-f	Debtor : filing s	pouse	
	Cop	by line 4 here	4.	\$_	5,597.8	<u>4</u>	\$		N/A	-
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	734.0		\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b.	\$_	783.7		\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.0		\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.0	_	\$		N/A	_
	5e. 5f.	Insurance Domestic support obligations	5e. 5f.	\$_ \$	245.2		Φ		N/A	_
	5g.	Union dues	5g.	ψ- \$	0.0 94.1		\$ <u></u>		N/A N/A	_
	5h.	Other deductions. Specify:	5h.⊣		0.0		+ \$		N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ _	1,857.2	6	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	3,740.5	8	\$		N/A	_
8.	<b>Lis</b> t 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.0	0	\$		N/A	
	8b.	Interest and dividends	8b.	\$	0.0		\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	0.0	0	\$		N/A	_
	8d.	Unemployment compensation	8d.	\$	0.0	0	\$		N/A	-
	8e.	Social Security	8e.	\$_	0.0	0	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$_	0.0	_	\$		N/A	_
	8g.	Pension or retirement income	8g.	\$_	0.0		\$		N/A	_
	8h.	Other monthly income. Specify:	_ 8h.⊣	- \$_	0.0	<u>0</u> -	· <sup>\$</sup> —		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.0	0	\$		N/A	Δ
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$		3,740.58 +	\$		N/A	= \$	3,740.58
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	Ľ		<u> </u>	<u> </u>			<u> </u>	0,1 10100
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not accify:	depen					chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certain lies						12.	\$	3,740.58
13.	Dο	you expect an increase or decrease within the year after you file this form	?						Combin monthl	ned y income
	<b>V</b>	No. Yes. Explain:	-							